

**CANDIDATE / OFFICEHOLDER REPORT:
SUPPORT & TOTALS**

**FORM C/OH
COVER SHEET PG 2**

14 C/OH NAME Riley, Chris

15 ACCOUNT # (Ethics Commission filers)
00010009

16 NOTICE FROM POLITICAL COMMITTEE(S)

.. This box is for notice of political expenditures by political committees to support the candidate / officeholder. These expenditures may have been made without the candidate's or officeholder's knowledge or consent. Candidates and officeholders are required to report this information only if they receive notice of such expenditures. ..

COMMITTEE TYPE

COMMITTEE NAME

GENERAL

COMMITTEE ADDRESS

SPECIFIC

COMMITTEE CAMPAIGN TREASURER NAME

additional pages

COMMITTEE CAMPAIGN TREASURER ADDRESS

17 CONTRIBUTION TOTALS

1. TOTAL POLITICAL CONTRIBUTIONS OF \$50 OR LESS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS), UNLESS ITEMIZED	\$	0.00
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2. TOTAL POLITICAL CONTRIBUTIONS (OTHER THAN PLEDGES, LOANS, OR GUARANTEES OF LOANS)	\$	10,239.00
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EXPENDITURE TOTALS

3. TOTAL POLITICAL EXPENDITURES OF \$50 OR LESS, UNLESS ITEMIZED	\$	107.46
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4. TOTAL POLITICAL EXPENDITURES	\$	35,192.26
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CONTRIBUTION BALANCE

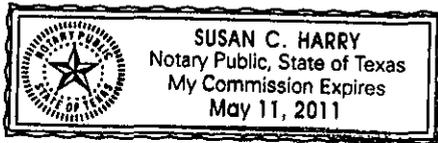
5. TOTAL POLITICAL CONTRIBUTIONS MAINTAINED AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00
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OUTSTANDING LOAN TOTALS

6. TOTAL PRINCIPAL AMOUNT OF ALL OUTSTANDING LOANS AS OF THE LAST DAY OF THE REPORTING PERIOD	\$	0.00
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18 AFFIDAVIT

I swear, or affirm, under penalty of perjury, that the accompanying report is true and correct and includes all information required to be reported by me under Title 15, Election Code.



Chris Riley

Signature of Candidate or Officeholder

AFFIX NOTARY STAMP / SEAL ABOVE

Sworn to and subscribed before me, by the said Chris Riley, this the 14th day of July, 2009, to certify which, witness my hand and seal of office.

Susan C. Harry
Signature of officer administering oath

Susan C. Harry
Print name of officer administering oath

Notary
Title of officer administering oath

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/14 Report: 3/32

2 FILER NAME Riley, Chris

3 ACCOUNT # (Ethics Commission filers)
00010009

4 Date **5** Full name of contributor out-of-state PAC (ID# _____)
05/04/2009 Anderson, Tammi

7 Amount of contribution (\$) **8** In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
3600 N. Capital of Texas Highway
Austin, TX 78746

\$350.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)
Homemaker

Date Full name of contributor out-of-state PAC (ID# _____)
05/01/2009 Byers, Julie

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
4516 Balcones Dr.
Austin, TX 78731

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
05/08/2009 Casias, Michael

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
2113 Riverview
Austin, TX 78702

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
04/30/2009 Cheaney, Shelia Enid

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
6016 Mount Bonnell Cove
Austin, TX 78731

\$25.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
05/01/2009 Cheaney, Shelia Enid

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
6016 Mount Bonnell Cove
Austin, TX 78731-3515

\$25.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/14 Report: 4/32	
2 FILER NAME Riley, Chris		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 05/03/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Cravey, Emma <hr/> 6 Contributor address; City; State; Zip Code 2103A La Casa Dr. Austin, TX 78704	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/08/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Curry, Mark <hr/> Contributor address; City; State; Zip Code 4000 Table Rock Austin, TX 78731	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/02/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Duncan, Michelle Angelique <hr/> Contributor address; City; State; Zip Code 3103 Canter Lane Austin, TX 78759	Amount of contribution (\$) \$10.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/02/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Fitzpatrick, John <hr/> Contributor address; City; State; Zip Code 1706 Nickerson Street Austin, TX 78704	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 04/30/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Gayle, Dewitt <hr/> Contributor address; City; State; Zip Code 1609 Scenic Drive Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Architect		Employer (See Instructions) RTG Partners	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 3/14 Report: 5/32

2 FILER NAME Riley, Chris

3 ACCOUNT # (Ethics Commission filers)
00010009

4 Date **5** Full name of contributor out-of-state PAC (ID# _____)
05/03/2009 Ghahremani, Kay

7 Amount of contribution (\$) **8** In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
3036 Thrushwood Dr.
Austin, TX 78757

\$100.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
04/30/2009 Graham, Alan

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
1408 Redbud Trail
Austin, TX 78746

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
05/01/2009 Griebel, Thomas

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
8332 La Plata Loop
Austin, TX 78737

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
05/05/2009 Gutierrez, Jenice

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
360 Nueces #1008
Austin, TX 78701

\$50.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
05/08/2009 Hahn, Jeffrey

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
6700 Hot Springs Dr.
Austin, TX 78749

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/14 Report: 6/32	
2 FILER NAME Riley, Chris		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 05/01/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Handcox, Berl 6 Contributor address; City; State; Zip Code 5202 Rambling Range Austin, TX 78727	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions) Retired		10 Employer (See Instructions) None	
Date 05/09/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Harris, Lisa Contributor address; City; State; Zip Code 4522 Avenue F. Austin, TX 78751	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/06/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Heidrick, Clarke Contributor address; City; State; Zip Code 3702 Eastledge Dr. Austin, TX 78731	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/03/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Herndon, Benjamin Contributor address; City; State; Zip Code 1111 West 12th St. #111 Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Research Assistant		Employer (See Instructions) UT Austin	
Date 05/07/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hightower, Susan Contributor address; City; State; Zip Code 2214 Alta Vista Ave. Austin, TX 78704	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 5/14 Report: 7/32	
2 FILER NAME Riley, Chris		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 05/04/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hill, Richard 6 Contributor address; City; State; Zip Code 2303 Windsor Rd. Austin, TX 78703	7 Amount of contribution (\$) \$350.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions) Partner		10 Employer (See Instructions) Hill Partners, Inc.	
Date 05/06/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hogan, Bill Contributor address; City; State; Zip Code 719 W. 6th St. Austin, TX 78701	Amount of contribution (\$) \$22.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/03/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Holland, Sarah Contributor address; City; State; Zip Code 1707 Wethersfield Rd. Austin, TX 78703	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/08/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hornaday, Walter & Raina Contributor address; City; State; Zip Code 908 West 18th St. Austin, TX 78701	Amount of contribution (\$) \$700.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Wind Farmer / Generation Operator		Employer (See Instructions) Cielo Wind Services / Cielo Wind Services	
Date 05/02/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Hornburg, Kernan Contributor address; City; State; Zip Code 12105 Scribe Dr. Austin, TX 78759	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/14 Report: 8/32	
2 FILER NAME Riley, Chris		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 05/04/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Jaikumar, Arjun Kent 6 Contributor address; City; State; Zip Code 2161 42nd St. Astoria, NY 11105	7 Amount of contribution (\$) \$25.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/03/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Johnson, Matthew Contributor address; City; State; Zip Code 611 Oakland Ave. Austin, TX 78703	Amount of contribution (\$) \$25.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/01/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Kennedy, Peter Contributor address; City; State; Zip Code 4401 Avenue H Austin, TX 78751	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/06/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Klein, Michael Contributor address; City; State; Zip Code 119 E. 6th St. Ste. 304 Austin, TX 78701	Amount of contribution (\$) \$22.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/08/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Laine, Samuel Contributor address; City; State; Zip Code 5421 Hitcher Bnd. Austin, TX 78749	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Associate		Employer (See Instructions) Riverside Resources	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/14 Report: 9/32	
2 FILER NAME Riley, Chris		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 05/05/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lance, Kent Jr. 6 Contributor address; City; State; Zip Code 3600 N Capital of TX Hwy Bldg B Ste 250 Austin, TX 78746	7 Amount of contribution (\$) \$200.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions) Associate		10 Employer (See Instructions) Hill Partners	
Date 05/01/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Law Office of Jimmy Nassour Contributor address; City; State; Zip Code 3839 Bee Cave Rd. Ste. 200 Austin, TX 78746	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/01/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Lowerre, Richard Contributor address; City; State; Zip Code 725 Patterson Austin, TX 78703	Amount of contribution (\$) \$100.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/06/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Marvin, Flora Contributor address; City; State; Zip Code 2708 Westlake Dr. Austin, TX 78746	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/01/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Mayo Clark, Pamela Contributor address; City; State; Zip Code 4100 Bluffridge Dr. Austin, TX 78759	Amount of contribution (\$) \$50.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/14 Report: 10/32	
2 FILER NAME Riley, Chris		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 05/01/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moore, Catherine 6 Contributor address; City; State; Zip Code 3802 Avenue H. Austin, TX 78751	7 Amount of contribution (\$) \$50.00	8 In-kind contribution description (if applicable)
9 Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
10 Employer (See Instructions)			
Date 05/07/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Moss, Ron Contributor address; City; State; Zip Code 7705 Stonehaven Circle Austin, TX 78731	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) attorney		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) Graves Dougherty Hearon & Moody, P.C.			
Date 05/04/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Neal, Erin Lee Contributor address; City; State; Zip Code 1345 East Whitten Place Chandler, AZ 85225	Amount of contribution (\$) \$40.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions)		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions)			
Date 05/09/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Pedersen, Craig Contributor address; City; State; Zip Code 4703 Trail Crest Circle Austin, TX 78735	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Vice President - Water Resources - Texas		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) URS			
Date 05/05/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Penn, Walter Contributor address; City; State; Zip Code 1109 Kennan Rd. Austin, TX 78746	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
Principal occupation / Job title (See Instructions) Financial Advisor		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Employer (See Instructions) Raymond James			

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 9/14 Report: 11/32	
2 FILER NAME Riley, Chris		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 05/09/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Phillips, Gregory 6 Contributor address; City; State; Zip Code 4100 Michael Neill Dr. Austin, TX 78730	7 Amount of contribution (\$) \$100.00	8 In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 04/30/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Rankin, Susan Contributor address; City; State; Zip Code 3216 Harris Park Austin, TX 78705	Amount of contribution (\$) \$150.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions)		Employer (See Instructions)	
Date 05/08/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reese, Andrew Contributor address; City; State; Zip Code 2914 Regents Park Austin, TX 78746	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Homemaker		Employer (See Instructions) n/a	
Date 05/08/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reese, Donald Contributor address; City; State; Zip Code 100 Congress Ave., Ste. 780 Austin, TX 78701	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Founder		Employer (See Instructions) Riverside Resources	
Date 05/06/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Reese, Gina Contributor address; City; State; Zip Code 2914 Regents Park Austin, TX 78746	Amount of contribution (\$) \$250.00	In-kind contribution description (if applicable)
		(If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	
Principal occupation / Job title (See Instructions) Associate		Employer (See Instructions) Ironwood Real Estate	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 10/14 Report: 12/32

2 FILER NAME Riley, Chris

3 ACCOUNT # (Ethics Commission filers)
00010009

4 Date **5** Full name of contributor out-of-state PAC (ID# _____)
05/07/2009 Rhode, Brett

7 Amount of contribution (\$) **8** In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
808 Dawson
Austin, TX 78704

\$350.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)
Architect

10 Employer (See Instructions)
Rhode Partners

Date Full name of contributor out-of-state PAC (ID# _____)
05/09/2009 Rieck, Peter

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
6805 Vallecito Dr.
Austin, TX 78759

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
05/01/2009 Rostami, Amir

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
5729 N. Scout Island Cir.
Austin, TX 78731

\$22.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
05/06/2009 Schenkan, Phyllis

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
3505 Mount Bonnell Rd.
Austin, TX 78731

\$50.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
05/06/2009 Scherer, Bradley

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
2 Bank St. Apt. 16
New York, NY 10014

\$25.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 11/14 Report: 13/32

2 FILER NAME Riley, Chris

3 ACCOUNT # (Ethics Commission filers)
00010009

4 Date 05/04/2009
5 Full name of contributor out-of-state PAC (ID# _____)
Sherman, Max

7 Amount of contribution (\$) | 8 In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
3505 Greenway
Austin, TX 78705

\$100.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date 05/07/2009
Full name of contributor out-of-state PAC (ID# _____)
Smith, Craig

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
1908 Barton Parkway
Austin, TX 78704

\$100.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 05/05/2009
Full name of contributor out-of-state PAC (ID# _____)
Smitheal, Jeremy

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
100 Congress Ave., Ste. 780
Austin, TX 78701

\$350.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)
Principal

Employer (See Instructions)
Riverside Resources

Date 05/03/2009
Full name of contributor out-of-state PAC (ID# _____)
Souhami, Gloria

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
802 Norwalk Ln.
Austin, TX 78703

\$25.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date 05/05/2009
Full name of contributor out-of-state PAC (ID# _____)
Stack, David

Amount of contribution (\$) | In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
1525 E. Candlestick Dr.
Tempe, AZ 85283

\$25.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 12/14 Report: 14/32

2 FILER NAME Riley, Chris

3 ACCOUNT # (Ethics Commission filers)
00010009

4 Date **5** Full name of contributor out-of-state PAC (ID# _____)
04/30/2009 Stumberg, Eric

7 Amount of contribution (\$) **8** In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
3911 Avenue G
Austin, TX 78751

\$250.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)
CEO

10 Employer (See Instructions)
TengolInternet, Inc.

Date Full name of contributor out-of-state PAC (ID# _____)
05/07/2009 Taylor, Beau

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
11208 Hidden Bluff Dr.
Austin, TX 78754

\$25.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
05/07/2009 Tilney, Wiliam Angus

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
5516 Avenue G.
Austin, TX 78751

\$25.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
05/01/2009 Vandelden, Jeffrey

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
5809 Painted Valley Rd.
Austin, TX 78759

\$22.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
05/06/2009 Vita, Brian

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
1007 S. Congress Ave. Apt. 432
Austin, TX 78704

\$25.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 13/14 Report: 15/32	
2 FILER NAME Riley, Chris		3 ACCOUNT # (Ethics Commission filers) 00010009	
4 Date 05/01/2009	5 Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Waterloo Brothers LLC 6 Contributor address; City; State; Zip Code 705 W. Lynn St. Austin, TX 78703	7 Amount of contribution (\$) \$210.00	8 In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
9 Principal occupation / Job title (See Instructions)		10 Employer (See Instructions)	
Date 05/06/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Whatley, Melba Contributor address; City; State; Zip Code 2909 W. 35th St. Austin, TX 78703	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) investments		Employer (See Instructions) clarite holdings	
Date 05/02/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Williams, Clayton Contributor address; City; State; Zip Code 6 Desta Drive Ste. 6500 Midland, TX 79705	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) investments		Employer (See Instructions) Self	
Date 05/02/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Williams, Modesta Jr. Contributor address; City; State; Zip Code 6 Desta Drive Ste. 6500 Midland, TX 79705	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) Owner		Employer (See Instructions) CWEI	
Date 05/06/2009	Full name of contributor <input type="checkbox"/> out-of-state PAC (ID# _____) Winetroub, Jerald Contributor address; City; State; Zip Code 515 Congress Avenue, Suite 2230 Austin, TX 78701	Amount of contribution (\$) \$350.00	In-kind contribution description (if applicable) (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>
Principal occupation / Job title (See Instructions) President		Employer (See Instructions) Jerald Winetroub Companies	

POLITICAL CONTRIBUTIONS OTHER THAN PLEDGES OR LOANS

SCHEDULE A

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 14/14 Report: 16/32

2 FILER NAME Riley, Chris

3 ACCOUNT # (Ethics Commission filers)
00010009

4 Date **5** Full name of contributor out-of-state PAC (ID# _____)
05/06/2009 Womack, Brad

7 Amount of contribution (\$) **8** In-kind contribution description (if applicable)

6 Contributor address; City; State; Zip Code
719 W. 6th St.
Austin, TX 78701

\$22.00

(If travel outside of Texas, complete Schedule T)

9 Principal occupation / Job title (See Instructions)

10 Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
05/06/2009 Woody, Bob

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
807 Brazos St. #311
Austin, TX 78701

\$22.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

Date Full name of contributor out-of-state PAC (ID# _____)
05/06/2009 Yassine, Mike

Amount of contribution (\$) In-kind contribution description (if applicable)

Contributor address; City; State; Zip Code
213 W. 4th St.
Ste. 200
Austin, TX 78701

\$22.00

(If travel outside of Texas, complete Schedule T)

Principal occupation / Job title (See Instructions)

Employer (See Instructions)

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/11 Report: 17/32

2 FILER NAME Riley, Chris

3 ACCOUNT # (Ethics Commission filers)
00010009

4 Date

05/22/2009

5 Payee name
Constant Contact

7 Amount (\$)

\$85.00

6 Payee address; City; State; Zip Code
1601 Trapelo Rd., Ste. 329
Waltham, MA 2451

8 Purpose of payment (See instructions regarding type of information required.)
Email List Management

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:
Office held:

Date

06/22/2009

Payee name
Constant contact

Amount (\$)

\$50.00

Payee address; City; State; Zip Code
1601 Trapelo Rd., Ste. 329
Waltham, MA 02451

Purpose of payment (See instructions regarding type of information required.)
email service

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:
Office held:

Date

05/18/2009

Payee name
Eastside Café

Amount (\$)

\$50.14

Payee address; City; State; Zip Code
2113 Manor Rd.
Austin, TX 78722

Purpose of payment (See instructions regarding type of information required.)
Meals

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:
Office held:

Date

05/11/2009

Payee name
Elysium

Amount (\$)

\$104.99

Payee address; City; State; Zip Code
705 Red River
Austin, TX 78701

Purpose of payment (See instructions regarding type of information required.)
Intern appreciation party

** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:
Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 2/11 Report: 18/32
2 FILER NAME Riley, Chris		3 ACCOUNT # (Ethics Commission filers) 00010009
4 Date 05/01/2009	5 Payee name Enviromedia 6 Payee address; City; State; Zip Code 1717 W. 6th St. Ste. 400 Austin, TX 78703	7 Amount (\$) \$8,670.00
8 Purpose of payment (See instructions regarding type of information required.) Television Advertising (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 05/05/2009	Payee name Enviromedia Payee address; City; State; Zip Code 1717 W. 6th St. Ste. 400 Austin, TX 78703	Amount (\$) \$1,035.00
Purpose of payment (See instructions regarding type of information required.) Television Advertising (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 05/02/2009	Payee name Facebook Payee address; City; State; Zip Code 156 University Ave. Palo Alto, CA 94301	Amount (\$) \$39.99
Purpose of payment (See instructions regarding type of information required.) Advertising (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 05/04/2009	Payee name Facebook Payee address; City; State; Zip Code 156 University Ave. Palo Alto, CA 94301	Amount (\$) \$40.00
Purpose of payment (See instructions regarding type of information required.) Advertising (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/11 Report: 19/32
2 FILER NAME Riley, Chris		3 ACCOUNT # (Ethics Commission filers) 00010009
4 Date 05/05/2009	5 Payee name Facebook 6 Payee address; City; State; Zip Code 156 University Ave. Palo Alto, CA 94301	7 Amount (\$) \$40.00
8 Purpose of payment (See instructions regarding type of information required.) Advertising (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 05/06/2009	Payee name Facebook Payee address; City; State; Zip Code 156 University Ave. Palo Alto, CA 94301	Amount (\$) \$29.99
Purpose of payment (See instructions regarding type of information required.) Advertising (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 05/08/2009	Payee name Facebook Payee address; City; State; Zip Code 156 University Ave. Palo Alto, CA 94301	Amount (\$) \$30.00
Purpose of payment (See instructions regarding type of information required.) Advertising (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 05/08/2009	Payee name Facebook Payee address; City; State; Zip Code 156 University Ave. Palo Alto, CA 94301	Amount (\$) \$30.00
Purpose of payment (See instructions regarding type of information required.) Advertising (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 4/11 Report: 20/32
2 FILER NAME Riley, Chris		3 ACCOUNT # (Ethics Commission filers) 00010009
4 Date 05/09/2009	5 Payee name Facebook 6 Payee address; City; State; Zip Code 156 University Ave. Palo Alto, CA 94301	7 Amount (\$) \$30.00
8 Purpose of payment (See instructions regarding type of information required.) Advertising (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 05/10/2009	Payee name Facebook Payee address; City; State; Zip Code 156 University Ave. Palo Alto, CA 94301	Amount (\$) \$45.00
Purpose of payment (See instructions regarding type of information required.) Advertising (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 05/10/2009	Payee name Facebook Payee address; City; State; Zip Code 156 University Ave. Palo Alto, CA 94301	Amount (\$) \$45.00
Purpose of payment (See instructions regarding type of information required.) Advertising (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 05/13/2009	Payee name Facebook Payee address; City; State; Zip Code 156 University Ave. Palo Alto, CA 94301	Amount (\$) \$44.99
Purpose of payment (See instructions regarding type of information required.) Advertising (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 5/11 Report: 21/32

2 FILER NAME Riley, Chris

3 ACCOUNT # (Ethics Commission filers)
00010009

4 Date	5 Payee name	7 Amount (\$)
05/13/2009	Facebook <hr/> 6 Payee address; City; State; Zip Code 156 University Ave. Palo Alto, CA 94301	\$44.96

8 Purpose of payment (See instructions regarding type of information required.) Advertising (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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Date	Payee name	Amount (\$)
05/13/2009	Garrett, Hall <hr/> Payee address; City; State; Zip Code 2509 Peachtree Mckinney, TX 78070	\$250.00

8 Purpose of payment (See instructions regarding type of information required.) Campaign Salary: Intern (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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Date	Payee name	Amount (\$)
05/05/2009	Goss, Delwin <hr/> Payee address; City; State; Zip Code 6410 Ponca St. Austin, TX 78741	\$120.00

8 Purpose of payment (See instructions regarding type of information required.) Contract Labor-Yard Signs (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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Date	Payee name	Amount (\$)
04/30/2009	Haenschen, Katherine <hr/> Payee address; City; State; Zip Code 4505 Duval St. Apt. 229 Austin, TX 78751	\$3,000.00

8 Purpose of payment (See instructions regarding type of information required.) Campaign Manager Salary (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 6/11 Report: 22/32
2 FILER NAME Riley, Chris		3 ACCOUNT # (Ethics Commission filers) 00010009
4 Date 05/08/2009	5 Payee name Harry, Susan 6 Payee address; City; State; Zip Code 2520 Longview St. Ste. 211 Austin, TX 78705	7 Amount (\$) \$3,000.00
8 Purpose of payment (See instructions regarding type of information required.) Campaign Salary: Finance Manager (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 05/04/2009	Payee name Kelly Graphics Payee address; City; State; Zip Code 1409 Quaker Ridge Austin, TX 78746	Amount (\$) \$2,918.32
Purpose of payment (See instructions regarding type of information required.) Printing (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 05/04/2009	Payee name Kelly Graphics Payee address; City; State; Zip Code 1409 Quaker Ridge Austin, TX 78746	Amount (\$) \$489.76
Purpose of payment (See instructions regarding type of information required.) Printing (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 05/13/2009	Payee name Ledesma, Chris Payee address; City; State; Zip Code 4415 Avenue A Austin, TX 78751	Amount (\$) \$250.00
Purpose of payment (See instructions regarding type of information required.) Campaign Salary: Intern (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 7/11 Report: 23/32
2 FILER NAME Riley, Chris		3 ACCOUNT # (Ethics Commission filers) 00010009
4 Date 05/04/2009	5 Payee name McKinley, Warren 6 Payee address; City; State; Zip Code 45 Lovegrass Lane Austin, TX 78745	7 Amount (\$) \$100.00
8 Purpose of payment (See instructions regarding type of information required.) Event Expense (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 05/14/2009	Payee name Nokoa Payee address; City; State; Zip Code 1223 Rosewood Ave. Austin, TX 78702	Amount (\$) \$920.00
Purpose of payment (See instructions regarding type of information required.) Advertising (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 05/05/2009	Payee name Office Max Payee address; City; State; Zip Code 907 W. 5th St. Austin, TX 78701	Amount (\$) \$62.76
Purpose of payment (See instructions regarding type of information required.) Office Supplies (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 05/13/2009	Payee name Parikh, Ishanee Payee address; City; State; Zip Code 742 Annies Way Sugarland, TX 77479	Amount (\$) \$250.00
Purpose of payment (See instructions regarding type of information required.) Campaign Salary: Intern (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES**SCHEDULE F**

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 8/11 Report: 24/32
2 FILER NAME Riley, Chris		3 ACCOUNT # (Ethics Commission filers) 00010009
4 Date 05/10/2009	5 Payee name Piryx 6 Payee address; City; State; Zip Code 401 W. 15th St. Ste. 520 Austin, TX 78701	7 Amount (\$) \$193.34
8 Purpose of payment (See instructions regarding type of information required.) Credit card processing fees (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 05/07/2009	Payee name Political Calling Payee address; City; State; Zip Code 712 5th St. Ste.,E Davis, CA 95616	Amount (\$) \$1,051.75
Purpose of payment (See instructions regarding type of information required.) Robocall (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 05/13/2009	Payee name Puryear, Veronica Payee address; City; State; Zip Code 1301 W Lynn St Apt 310 Austin, TX 78703	Amount (\$) \$500.00
Purpose of payment (See instructions regarding type of information required.) Campaign Salary: Intern (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 05/09/2009	Payee name Scholz Bier Garten Payee address; City; State; Zip Code 1607 San Jacinto Austin, TX 78701	Amount (\$) \$935.92
Purpose of payment (See instructions regarding type of information required.) Election Night Party (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 9/11 Report: 25/32
2 FILER NAME Riley, Chris		3 ACCOUNT # (Ethics Commission filers) 00010009
4 Date 05/13/2009	5 Payee name Shea, Philip 6 Payee address; City; State; Zip Code c/o 621 West 7th St. Austin, TX 78701	7 Amount (\$) \$500.00
8 Purpose of payment (See instructions regarding type of information required.) Campaign Salary: Intern (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 05/04/2009	Payee name Telgoogle (ADWORDS) Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043	Amount (\$) \$50.90
Purpose of payment (See instructions regarding type of information required.) Advertising (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 05/08/2009	Payee name Telgoogle (ADWORDS) Payee address; City; State; Zip Code 1600 Amphitheatre Parkway Mountain View, CA 94043	Amount (\$) \$23.74
Purpose of payment (See instructions regarding type of information required.) Advertising (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
Date 05/01/2009	Payee name USPS Payee address; City; State; Zip Code Central Park West Station Austin, TX 78705	Amount (\$) \$28.00
Purpose of payment (See instructions regarding type of information required.) Postage (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:

POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 10/11 Report: 26/32

2 FILER NAME Riley, Chris

3 ACCOUNT # (Ethics Commission filers)
00010009

4 Date	5 Payee name USPS	7 Amount (\$)
05/02/2009	6 Payee address; City; State; Zip Code Central Park West Station Austin, TX 78705	\$11.20

8 Purpose of payment (See instructions regarding type of information required.) Postage (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	9 ** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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Date	Payee name USPS	Amount (\$)
06/12/2009	Payee address; City; State; Zip Code Central Park West Station Austin, TX 78705	\$10.00

Purpose of payment (See instructions regarding type of information required.) Postage (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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Date	Payee name USPS	Amount (\$)
06/12/2009	Payee address; City; State; Zip Code Downtown Station Austin, TX 78701	\$27.00

Purpose of payment (See instructions regarding type of information required.) postage (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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Date	Payee name Wadia, Bahman	Amount (\$)
05/13/2009	Payee address; City; State; Zip Code 2205 Cliffs Edge Dr. Austin, TX 78733	\$500.00

Purpose of payment (See instructions regarding type of information required.) Campaign Salary: Intern (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	** Complete if direct expenditure to benefit Candidate/Officeholder ** Candidate / Officeholder name: Office sought: Office held:
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POLITICAL EXPENDITURES

SCHEDULE F

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 11/11 Report: 27/32

2 FILER NAME Riley, Chris

3 ACCOUNT # (Ethics Commission filers)
00010009

4 Date

05/08/2009

5 Payee name
Worley

7 Amount (\$)

\$2,432.38

6 Payee address; City; State; Zip Code
3217 N. IH 35
Austin, TX 78722

8 Purpose of payment (See instructions regarding type of information required.)
Printing

9 ** Complete if direct expenditure to benefit Candidate/Officeholder **
Candidate / Officeholder name:

(If travel outside of Texas, complete Schedule T)

Office sought:
Office held:

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/3 Report: 28/32

2 FILER NAME Riley, Chris

3 ACCOUNT # (Ethics Commission filers)
00010009

4 Date 05/15/2009	5 Payee name AT&T	8 Amount (\$) \$1,241.40
	6 Payee address; City; State; Zip Code PO Box 5001 Carol Stream, IL 60197	
7 Purpose of expenditure (See instructions regarding type of information required.) Phone (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

Date 06/22/2009	Payee name Constant Contact	Amount (\$) \$35.00
	Payee address; City; State; Zip Code 1601 Trapelo Rd., Ste. 329 Waltham, MA 02451	
Purpose of expenditure (See instructions regarding type of information required.) Email List Management (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

Date 05/15/2009	Payee name David Thomas Photography	Amount (\$) \$150.00
	Payee address; City; State; Zip Code 2004-E B 9th St. Austin, TX 78702	
Purpose of expenditure (See instructions regarding type of information required.) Photography (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

Date 05/15/2009	Payee name Haenschen, Katherine	Amount (\$) \$1,500.00
	Payee address; City; State; Zip Code 4505 Duval St. Apt. 229 Austin, TX 78751	
Purpose of expenditure (See instructions regarding type of information required.) Campaign Manager Salary (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

Date 05/17/2009	Payee name Kelly Graphics	Amount (\$) \$276.46
	Payee address; City; State; Zip Code 1409 Quaker Ridge Austin, TX 78746	
Purpose of expenditure (See instructions regarding type of information required.) Printing & mailing services (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>		<input checked="" type="checkbox"/> Reimbursement from political contributions intended

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 2/3 Report: 29/32

2 FILER NAME Riley, Chris

3 ACCOUNT # (Ethics Commission filers)
00010009

<p>4 Date 05/15/2009</p>	<p>5 Payee name Litt, Mike</p> <hr/> <p>6 Payee address; City; State; Zip Code 4415 Avenue A Austin, TX 78751</p> <p>7 Purpose of expenditure (See instructions regarding type of information required.) Campaign Salary: Field Director (If travel outside of Texas, complete Schedule T) <input type="checkbox"/></p>	<p>8 Amount (\$) \$1,050.00</p> <p><input checked="" type="checkbox"/> Reimbursement from political contributions intended</p>
<p>Date 05/22/2009</p>	<p>Payee name NGP</p> <hr/> <p>Payee address; City; State; Zip Code 1225 Eye St., NW Ste. 1225 Washington, DC 20005</p> <p>Purpose of expenditure (See instructions regarding type of information required.) Software (If travel outside of Texas, complete Schedule T) <input type="checkbox"/></p>	<p>Amount (\$) \$250.00</p> <p><input checked="" type="checkbox"/> Reimbursement from political contributions intended</p>
<p>Date 05/15/2009</p>	<p>Payee name People Calling People</p> <hr/> <p>Payee address; City; State; Zip Code 3948 Legacy Dr. Ste. 106 PMB 272 Plano, TX 75023</p> <p>Purpose of expenditure (See instructions regarding type of information required.) Robocall (If travel outside of Texas, complete Schedule T) <input type="checkbox"/></p>	<p>Amount (\$) \$863.15</p> <p><input checked="" type="checkbox"/> Reimbursement from political contributions intended</p>
<p>Date 05/15/2009</p>	<p>Payee name Smart Mail</p> <hr/> <p>Payee address; City; State; Zip Code 2012 Anchor Lane Austin, TX 78723</p> <p>Purpose of expenditure (See instructions regarding type of information required.) Mailing services (If travel outside of Texas, complete Schedule T) <input type="checkbox"/></p>	<p>Amount (\$) \$737.15</p> <p><input checked="" type="checkbox"/> Reimbursement from political contributions intended</p>
<p>Date 05/15/2009</p>	<p>Payee name Smart Mail</p> <hr/> <p>Payee address; City; State; Zip Code 2011 Anchor Lane Austin, TX 78723</p> <p>Purpose of expenditure (See instructions regarding type of information required.) Mailing services (If travel outside of Texas, complete Schedule T) <input type="checkbox"/></p>	<p>Amount (\$) \$359.55</p> <p><input checked="" type="checkbox"/> Reimbursement from political contributions intended</p>

POLITICAL EXPENDITURES MADE FROM PERSONAL FUNDS

SCHEDULE G

The INSTRUCTION GUIDE explains how to complete this form.		1 PAGE # Schedule: 3/3 Report: 30/32
2 FILER NAME Riley, Chris		3 ACCOUNT # (Ethics Commission filers) 00010009
4 Date	5 Payee name Smart Mail	8 Amount (\$)
05/15/2009	6 Payee address; City; State; Zip Code 2011 Anchor Lane Austin, TX 78723	\$87.70
	7 Purpose of expenditure (See instructions regarding type of information required.) Mailing services (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name USPS	Amount (\$)
06/15/2009	Payee address; City; State; Zip Code Central Park West Station Austin, TX 78705	\$176.00
	Purpose of expenditure (See instructions regarding type of information required.) Postage (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended
Date	Payee name Worley	Amount (\$)
05/15/2009	Payee address; City; State; Zip Code 3217 North IH 35 Austin, TX 78722	\$318.26
	Purpose of expenditure (See instructions regarding type of information required.) Printing (If travel outside of Texas, complete Schedule T) <input type="checkbox"/>	<input checked="" type="checkbox"/> Reimbursement from political contributions intended

CREDITS (optional)

SCHEDULE K

The INSTRUCTION GUIDE explains how to complete this form.

1 PAGE #
Schedule: 1/1 Report: 31/32

2 FILER NAME Riley, Chris

3 ACCOUNT # (Ethics Commission filers)
00010009

4 Date

05/14/2009

5 Payor name
Arc360 Residential

8 Amount (\$)

\$300.00

6 Payor address; City; State; Zip Code
360 Nueces Street
Austin, TX 78701

7 Reason for credit
deposit return

CANDIDATE/OFFICEHOLDER REPORT: DESIGNATION OF FINAL REPORT

FORM C/OH - FR

The Instruction Guide explains how to complete this form.
** Complete only if 'Report Type' on page 1 is marked 'Final Report' **

Page 32 of 32

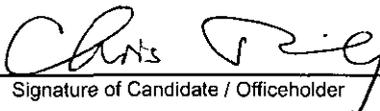
1 C/OH NAME Riley, Chris

2 ACCOUNT # (Ethics Commission filers)

00010009

3 SIGNATURE

I do not expect any further political contributions or political expenditures in connection with my candidacy. I understand that designating a report as a final report terminates my campaign treasurer appointment. I also understand that I may not accept any campaign contributions or make any campaign expenditures without a campaign treasurer appointment on file.


Signature of Candidate / Officeholder

4 FILER WHO IS NOT AN OFFICEHOLDER

** Complete A & B below only if you are not an officeholder **

A. CAMPAIGN FUNDS

Check only one:

- I do not have unexpended contributions or unexpended interest or income earned from political contributions.
- I have unexpended contributions or unexpended interest or income earned from political contributions. I understand that I may not convert unexpended political contributions or unexpended interest or income earned on political contributions to personal use. I also understand that I must file an annual report of unexpended contributions and that I may not retain unexpended contributions or unexpended interest or income earned on political contributions longer than six years after filing this final report. Further, I understand that I must dispose of unexpended political contributions and unexpended interest or income earned on political contributions in accordance with the requirements of Election Code, § 254.204.

B. ASSETS

Check only one:

- I do not retain assets purchased with political contributions or interest or other income from political contributions.
- I do retain assets purchased with political contributions or interest or other income from political contributions. I understand that I may not convert assets purchased with political contributions or interest or other income from political contributions to personal use. I also understand that I must dispose of assets purchased with political contributions in accordance with the requirements of Election Code, § 254.204.

Signature of Candidate

5 OFFICEHOLDER

** Complete this section only if you are an officeholder **

- I am aware that I remain subject to filing requirements applicable to an officeholder who does not have a campaign treasurer on file. I am also aware that I will be required to file reports of unexpended contributions if, at the time I cease holding office, I retain assets purchased with political contributions or interest or other income from political contributions.


Signature of Officeholder